

Testimony in Support of HB 5326  
“An Act Concerning Compassionate Aid in Dying for the Terminally Ill”  
The Rev. Joshua Mason Pawelek  
March 8, 2014

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Distinguished Members of the Public Health Committee:

I am the Rev. Josh Pawelek, minister of the Unitarian Universalist Society: East in Manchester and a resident of Glastonbury. Thank you for this opportunity to testify in support of HB 5326, “An Act Concerning Compassionate Aid in Dying for the Terminally Ill.”

The heart of the matter is this: providing aid in dying under the strict conditions contained in this bill preserves human dignity. Every day there are people who receive news that there are no remaining medical interventions to treat a terminal illness that will inevitably and quickly end their life. Some of those people—not many, but some—upon receiving this news and after careful consideration of all the ramifications, find in themselves a strong desire to end their life by their own hand rather than let their disease run its course. Why this desire? They may be in great pain, but that’s not typically the reason—they know palliative care is available. They may be emotionally and spiritually depleted from fighting their disease, but that’s also not typically the reason—people who express this desire often display enormous emotional and spiritual capacity. They may be losing their mental faculties and fear becoming a burden to their loved ones. But again, this is rarely the primary reason. The primary reason some people seek aid in dying at the end stages of a terminal illness is because it assures them they will maintain their human dignity as their life winds down.

Our dignity lies in our ability to make choices about our destiny. When choice is denied, dignity is denied. Ending one’s life by one’s own hand is a final choice. For those who desire to end their own life after careful spiritual discernment and after meeting the strict conditions described in this bill, it is death with dignity.

There are some among us—not many, but some—who experience the denial of aid in dying at the end of life as a deeply painful stripping away of their dignity. There are some who experience the denial of aid in dying at the end of life as a failure of compassion, care and love. There are some who experience the denial of aid in dying at the end of life as abuse and a cause of greater suffering. HB 5326 is for such people. I urge you to support it.

One of the saddest situations I continually encounter in my ministry is this: a person who desires to end their life by their own hand is prevented from doing so by law. As their disease runs its course, they slip into a sustained non-lucid state, or perhaps a coma. At this point they no longer have the capacity to end their own life by their own hand. They are no longer mentally competent. They linger on in this state they never wished for, sometimes for months. Their family members then say to me: “This is not what our loved one wanted. This is not how our loved-one wanted to die.” At this point, it is clear to all involved that the dying person’s dignity has been severely compromised. HB 5326 seeks to address this tragic denial of human dignity.

As a pastor who will inevitably be asked to serve as a witness to requests for medication to aid in dying, assuming the person in question meets the criteria described in this bill, I cannot imagine saying “no, I don’t support you.” For me, to witness and support such a request, and to be present at the time of death if invited, would be an act of the most compassionate, loving ministry I can provide.

Some might argue that simply allowing a disease to take its course without hastening death—to allow a person’s life to wind down “naturally”—is also death with dignity. I agree. I note that many people choose to die “naturally” using only palliative care, and we often characterize their deaths as dignified. As a pastor I will always first counsel those under my care to strive for such a death rather than seek aid in dying. However, I also recognize there will always be people who are better able to let their lives end naturally if they have the comfort of knowing they can end their lives by their own hand. The heart of the matter is choice. Having choices brings comfort and solace. Data from Oregon, where the first aid in dying law was passed, suggest that many of those who obtain a prescription for life-ending medication don’t ultimately use it. They choose to let their life end “naturally.” Having legal access to the medication preserves their ability to choose how and when they will die. Preserving choice sustains dignity.

For the sake of sustaining human dignity, I urge you to vote in favor of HB 5326. Your favorable vote is far more than a political act. It is an act of great compassion, care and love.

Thank you.

Rev. Joshua Mason Pawelek